


5503 1242  
PART B - ISSUE FEE TRANSMITTAL  
\$30.00/501

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 3 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
 EDGAR H. HAUG CURTIS, MORRIS & SAFFORD 530 FIFTH AVENUE NEW YORK, NY 10036		INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		CO-INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are on reverse side			

SERIES CODE	SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
	07/11, 241	02/16/89	025	WILLSE, D	008 11/15/90
First Named Applicant		DATE MAILED			
JARVIK, ROBERT K.					

TITLE OF INVENTION: **INTERVENTRICULAR ARTIFICIAL HEARTS AND METHODS OF THEIR SURGICAL IMPLANTATION AND USE**

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
3 5402802147	623-003.000	K45	UTILITY	YES	1525.00	02/15/91

3. Further correspondence to be mailed to the following: Edgar H. Haug, Esq. Curtis, Morris & Safford, P.C. 530 Fifth Avenue New York, New York 10036	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1 Edgar H. Haug, Esq. 2 Curtis, Morris & Safford P.C. 3
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060 LP 12/12/90 07311921  
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DO NOT USE THIS SPACE  
1 242 525.00 CK  
1 501 30.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:		<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies 20	
(2) ADDRESS: (City & State or Country)		(Minimum of 10)	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION		6b. The following fees should be charged to:	
		DEPOSIT ACCOUNT NUMBER	
		(Enclose Part C)	
		<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies	
		<input type="checkbox"/> Any Deficiencies in Enclosed Fees (Minimum of 10)	
A. <input checked="" type="checkbox"/> This application is NOT assigned.		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
<input type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.		(Signature of party in interest of record)	
<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		John M. Kilcorpe	
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.		(Date)	
		12-4-90	
		NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	